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## Application or Docket Number

Substitute for Form PTO-875

09 967/67

(Column 1)	(Column 2)
1	2
3	4
5	6
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9	10
11	12
13	14
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97	98
99	100

**SMALL ENTITY**

• OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))				
SEARCH FEE (37 CFR 1.16(h), (i), or (m))				
EXAMINATION FEE (37 CFR 1.16(e), (p), or (q))				
TOTAL CLAIMS (37 CFR 1.16(j))	minus 20 =	*	X	=
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*	X	=
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))				
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**APPLICATION AS AMENDED – PART II**

(Column 1)	(Column 2)	(Column 3)
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**SMALL ENTITY**

Of

OTHER THAN  
SMALL ENTITY

AMENDMENT A	7/14/05		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.160)		53	Minus	53	=
	Independent (37 CFR 1.160)		7	Minus	7	=
	Application Size Fee (37 CFR 1.16(s))					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					

RATE (\$)		ADDITIONAL FEE (\$)	
X	=		
X	=		
TOTAL ADDY FEE			

RATE (\$)		ADDITIONAL FEE (\$)	
X	=		
X	=		
TOTAL ADDY FEE			

11-30-05

(Column 1).	(Column 2)	(Column 3)
1. Name of the person or entity	2. Address	3. City and State
4. Date of birth or incorporation	5. Date of death or dissolution	6. Date of last report
7. Name of the person or entity	8. Address	9. City and State
10. Date of birth or incorporation	11. Date of death or dissolution	12. Date of last report
13. Name of the person or entity	14. Address	15. City and State
16. Date of birth or incorporation	17. Date of death or dissolution	18. Date of last report
19. Name of the person or entity	20. Address	21. City and State
22. Date of birth or incorporation	23. Date of death or dissolution	24. Date of last report
25. Name of the person or entity	26. Address	27. City and State
28. Date of birth or incorporation	29. Date of death or dissolution	30. Date of last report
31. Name of the person or entity	32. Address	33. City and State
34. Date of birth or incorporation	35. Date of death or dissolution	36. Date of last report
37. Name of the person or entity	38. Address	39. City and State
40. Date of birth or incorporation	41. Date of death or dissolution	42. Date of last report
43. Name of the person or entity	44. Address	45. City and State
46. Date of birth or incorporation	47. Date of death or dissolution	48. Date of last report
49. Name of the person or entity	50. Address	51. City and State
52. Date of birth or incorporation	53. Date of death or dissolution	54. Date of last report
55. Name of the person or entity	56. Address	57. City and State
58. Date of birth or incorporation	59. Date of death or dissolution	60. Date of last report
61. Name of the person or entity	62. Address	63. City and State
64. Date of birth or incorporation	65. Date of death or dissolution	66. Date of last report
67. Name of the person or entity	68. Address	69. City and State
70. Date of birth or incorporation	71. Date of death or dissolution	72. Date of last report
73. Name of the person or entity	74. Address	75. City and State
76. Date of birth or incorporation	77. Date of death or dissolution	78. Date of last report
79. Name of the person or entity	80. Address	81. City and State
82. Date of birth or incorporation	83. Date of death or dissolution	84. Date of last report
85. Name of the person or entity	86. Address	87. City and State
88. Date of birth or incorporation	89. Date of death or dissolution	90. Date of last report
91. Name of the person or entity	92. Address	93. City and State
94. Date of birth or incorporation	95. Date of death or dissolution	96. Date of last report
97. Name of the person or entity	98. Address	99. City and State
100. Date of birth or incorporation	101. Date of death or dissolution	102. Date of last report

DATE (S)	ADD
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1

DATE (\$)	ADDITION
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.156(i))	53	Minus	** 53	=	X =	X =	OR	X =		
	Independent (37 CFR 1.16(b))	7	Minus	*** 7	=	X =	X =	OR	X =		
	Application Size Fee (37 CFR 1.16(s))							OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					TOTAL ADDL FEE		OR	TOTAL ADDL FEE		

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.**